# AMENDED

# **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**

For State and Local Candidates
For Single-Candidate Committees

1. DATE OF REPORT  JUN 8, 2009  2.b. IF COMMITTEE, NAME OF CANDIDATE  2.c. PO Berz  2.c. Po Berz  2.b. IF COMMITTEE, NAME OF CANDIDATE  3. ELECTION DATE  03-03-09  4.b. CAMPAIGN ADDRESS AND PHONE  Street or Rural Route  1000 Market Street Chatanoga TN 37402 423-266-4050  4.b. CAMPAIGN ADDRESS (if different than 4.a.)  Street or Rural Route  City  State  Zip Code  Phone  37402 423-266-4050  4.b. CAMPAIGN ADDRESS (if different than 4.a.)  Street or Rural Route  City  State  Zip Code  Phone  37402 423-266-4050  4.b. CAMPAIGN ADDRESS (if different than 4.a.)  Street or Rural Route  City  State  Zip Code  Phone  37402 423-266-4050  6. OFFICE SOUGHT (include district number, if applicable)  Chatanoga City Council - District 6  3. NAME OF POLITICAL TREASURER (may be candidate)  7. CATEGORYGRREPORT (Note cone)  FIRST SECOND THIND FOLITH  FIRMS SECOND THIND SERIOD  April 1, 2009  9. (Check croe)  a. This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less for this reporting period.  b. This campaign is exempt from detailed disclosure because contributions (including in-kind) received total more than \$1,000 or less for this reporting period.  b. This campaign is exempt from detailed disclosure because contributions (including in-kind) received total more than \$1,000 or less for this reporting period.  b. This campaign is exempt from detailed disclosure because contributions (including in-kind) received total more than \$1,000 or less for this reporting or campaign contributions and expenditures because contributions (including in-kind) received total more than \$1,000 or less for this reporting period.  c. This campaign is required to file a detailed file and exampaign contributions and expenditures report by the candidate committee by the Campaign File and the Campaign File and the Campaign File and the Campaign File and the C		January Canadate	- Committee	769	
2.b. IF COMMITTEE, NAME OF CANDIDATE  4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route 10.00 Market Street Challanouga TN 37402 423-266-4050  4.b. CANDIDATES HOME ADDRESS (if different than 4.a.) Street or Rural Route 31.2 Bass Road Challanouga TN 37421 423-266-4050  4.b. CANDIDATES HOME ADDRESS (if different than 4.a.) Street or Rural Route 31.2 Bass Road Challanouga TN 37421 423-266-4050  5. OFFICE SOUGHT (include district number, if applicable) 6. NAME OF POLITICAL TREASURER (may be candidate) Challanouga City Council - District 6  5. OFFICE SOUGHT (include district number, if applicable) 7  7. CATEGORY&RREPORT (Check one) 1. CATEGORY&REPORT (Check one) 1. CATEGORY&REPORT (Check one) 1. CATEGORY&REPORT (Check one) 1. CATEGORY&REPORT (Check one) 2. CHECK ONE) 2. CHECK ONE 2. ENDING DATE OF REPORTING PERIOD 3. ENDING DATE OF REPORTING PERIOD 3. ENDING DATE OF REPORTING PERIOD 3. ENDING DATE OF REPORTING PERIOD 4. CHECK ONE 3. ENDING DATE OF REPORTING PERIOD 3. ENDING DATE OF REPORTING PERIOD 4. CHECK ONE 3. ENDING DATE OF REPORTING PERIOD 4. CHECK ONE 3. ENDING DATE OF REPORTING PERIOD 4. CHECK ONE 3. ENDING DATE OF REPORTING PERIOD 5. ENDING DATE OF REPORTING PERIOD 5. ENDING DATE OF REPORTING PERIOD 5. DETERMINE CHECK ONE 5. ENDING DATE OF REPORTING PERIOD 5. DETERMINE CHECK ONE 5. ENDING DATE OF REPORTING PERIOD 5. DETERMINE CHECK ONE 5. ENDING DATE OF REPORTING PERIOD 5. DETERMINE CHECK ONE 5. ENDING DATE OF REPORTING PERIOD 5. DETERMINE CHECK ONE 5. ENDING DATE OF REPORTING PERIOD 5. DETERMINE CHECK ONE 5. ENDING DATE OF REPORTING PERIOD 5. DETERMINE CHECK ONE 5. ENDING DATE OF REPORTING PERIOD 5. DETERMINE CHECK ONE 5. ENDING DATE OF REPORTING PERIOD 5. DETERMINE CHECK ONE 5. ENDING DATE OF REPORTING PERIOD 5. DETERMINE CHECK ONE 5. ENDING DATE OF REPORTING PERIOD 5. DETERMINE CHECK ONE 5. DETERM					
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route 1000 Market Street Challanga TN 37402 423-266-4050 4.b. CANDIDATES HOME ADDRESS (if different than 100 g a TN 37402 423-266-4050 4.b. CANDIDATES HOME ADDRESS (if different than 100 g a TN 37402 423-266-4050 4.b. CANDIDATES HOME ADDRESS (if different than 100 g a TN 37402 423-266-4050 5. OFFICE SOURT (include district number, if applicable) 5. OFFICE SOURT (include district number, if applicable) 6. OFFICE SOURT (including including includin		Carol Ber	- Z		· .
A.B. CAMPAIGN ADDRESS AND PHONE   Street or Kural Route   City   State   Zip Code   Phone   10 o	2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION DATE	
Street or Rural Route  IOO Market Street Chattanoga TN 37402 423-266-4050  4.b. CANDIDATES HOME ADDRESS (if different than 4.a) Street or Rural Route Street or Rural Ru				03-03-0	59
1000 Market Street ChaHanoga TN 37402 423-266-4050					
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route 312 Bass Road Chattanouga TN 37421 423 192-6631  5. OFFICE SOUGHT (include district number, if applicable) 6. OFFICE SOUGHT (include district number, if applicable) 7. CATEGORY REPORT (Check one) FRST SECOND THRD FOURTH PRE PRE NICHTERS SUPPLEMENTAL SUPPLEMENTAL SUPPLEMENTAL QUARTER QUART			State	2	A STATE OF THE PARTY OF THE PAR
Street or Rural Route 31 2 Bass Road Chattanouga TN 37421 423-892-6631  5. OFFICE SOUGHT (include district number, if applicable) Chattanouga City Council - District 6 Chattanouga City City Council - District 6 Chattanouga City Council - District 7 Chattanouga City Council - District 6 Chattanouga City Council - District 6 Chattanouga City Council - District 7 Chattanouga City Council - District 8 Chattanouga City Council - District 7 Chattanouga City Council -			IN	37402	123-266-4050
312 Bass Road Chattanouga TN 37421 433-892-6631  5. OFFICE SOUGHT (include district number, if applicable) Chattanouga City Council - District 6 Council City Council - District 6 Council City City City City City City City City			State	7in Code	Dhana
Cha Hano oga City Council - District 6  7. CATEGORY & REPORT (Check one) FIRST SECOND THIRD FOURTH PRE PRE MOYEAR SUPPLEMENTAL  8.a. BEGINNING DATE OF REPORTING PERIOD April 1, 2009  9. (Check one)  a.   This campaign is exampt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete Items 12d., 12e. and 12t.)  b.   This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total more than \$1,000 finity reporting period.  10. I've do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, live swear or affirm that no campaign contributions have been expended for the personal financial benefit of candidate or for any other nonpolitical purpose as defined by the federal internal revenue cope signature of candidate.  11. WITNESS SIGNATURE    WITNESS SIGNATURE					
7. CATEGORY & REPORT (Check one)   FIRST SECOND THIRD FOURTH PRE- PRE- MIDYEAR SUPPLEMENTAL SUPP	[]	10.100mm   10.000mm   10.000m	E OF POLITICAL	TREASURER (may be	candidate)
First SECOND ON THIRD FOURTH PRE PRE MID-YEAR YEAR-END QUARTER QUARTER QUARTER QUARTER GUARTER SUPPLEMENTAL S		District 6 Jo	ison Ford		
QUARTER QUARTER QUARTER QUARTER SUPPLEMENTAL SUPPLEMENTAL	CATEGORY WRITEPORT (Check che)			TXÍ	П
8.8. BEGINNING DATE OF REPORTING PERIOD  April 1, 2009  9. (Check one)  a. This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete Items 12d., 12e. and 12f.)  b. This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.  10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act Additionally, live swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the farsfal internal revenue code.    Application				MID-YEAR	
9. (Check one)  a.  This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.)  b.  This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.  10.  We do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, live swear or affirm that no campaign contributions have enexpended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.					SUPPLEMENTAL
9. (Check one)  a.  This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete Items 12d., 12e. and 12f.)  b. This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.  10. Ilive do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required by the candidate committee by the Campaign Financial Disclosure Act. Additionally, live swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.  11. WITNESS SIGNATURE	April 1, 2009	Sur Water Survivors	June 30	2009	
tures total \$1,000 or less for this reporting period. (Complete Items 12d., 12e. and 12f.)  b. This campaign is required to file a detailed financial disclosure because contributions (including in-kirid) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.  10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm than to campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the faderal internal revenue code.  11. WITNESS SIGNATURE  12. SUMMARY  a. BALANCE ON HAND LAST REPORT  b. TOTAL RECEIPTS THIS PERIOD  c. TOTAL DISBURSEMENTS THIS PERIOD  d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)  c. TOTAL LOANS QUTSTANDING  s. TOTAL LOANS QUTSTANDING  c. TOTAL LOANS QUTSTANDING  s. TOTAL COMPAND THE PERIOD  c. TOTAL LOANS QUTSTANDING  s. TOTAL COMPAND THE PERIOD  c. TOTAL LOANS QUTSTANDING			0 11.,0 3.,		
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.  11. WITNESS SIGNATURE  12. SUMMARY  a. BALANCE ON HAND LAST REPORT  b. TOTAL DISBURSEMENTS THIS PERIOD  c. TOTAL DISBURSEMENTS THIS PERIOD  d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)  c. TOTAL LOANS QUTSTANDING  s. TOTAL LOANS QUTSTANDING  s. TOTAL LOANS QUTSTANDING  s. TOTAL COMMITTER THE PERIOD  s. TOTAL LOANS QUTSTANDING  s. TOTAL COMMITTER THE PERIOD  s. TOTAL COMMITTER THE PERIOD  s. TOTAL LOANS QUTSTANDING  s. TOTAL TOTAL COMMITTER THE PERIOD  s. TOTAL LOANS QUTSTANDING  s. TOTAL COMMITTER THE PERIOD  s. TOTAL LOANS QUTSTANDING  s. TOTAL COMMITTER THE PERIOD  s. TOTAL	This campaign is exempt from detaile tures total \$1,000 or less for this repo	d disclosure because contribution	ons (including in-kir 2d., 12e. and 12f.)	nd) received total \$1,00	0 or less AND expendi-
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.  11. WITNESS SIGNATURE  12. SUMMARY  a. BALANCE ON HAND LAST REPORT  b. TOTAL DISBURSEMENTS THIS PERIOD  c. TOTAL DISBURSEMENTS THIS PERIOD  d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)  c. TOTAL LOANS QUTSTANDING  s. TOTAL LOANS QUTSTANDING  s. TOTAL LOANS QUTSTANDING  s. TOTAL COMMITTER THE PERIOD  s. TOTAL LOANS QUTSTANDING  s. TOTAL COMMITTER THE PERIOD  s. TOTAL COMMITTER THE PERIOD  s. TOTAL LOANS QUTSTANDING  s. TOTAL TOTAL COMMITTER THE PERIOD  s. TOTAL LOANS QUTSTANDING  s. TOTAL COMMITTER THE PERIOD  s. TOTAL LOANS QUTSTANDING  s. TOTAL COMMITTER THE PERIOD  s. TOTAL	b. 🕱 This campaign is required to file a del	tailed financial disclosure becau	se contributions (in	cluding in-kirid) receive	ed total more than \$1,000
accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.    11. WITNESS SIGNATURE	and/or expenditures total more than \$	1,000 for this reporting period.			
Jennifer L. Berg 7/8/09 signature of witness date  12. SUMMARY  a. BALANCE ON HAND LAST REPORT \$ 2376.33 b. TOTAL RECEIPTS THIS PERIOD \$ 35.67 c. TOTAL DISBURSEMENTS THIS PERIOD \$ 896.90  d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) \$ /5/5.04  e. TOTAL LOANS OUTSTANDING \$ -0 -	accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we benefit of the candidate or for any other non	ons and expenditures required to swear or affirm that no campaid	the federal internal	e candidate committee ve been expended for the revenue code.	by the Campaign
12. SUMMARY  a. BALANCE ON HAND LAST REPORT	11. WITNESS SIGNATURE				
a. BALANCE ON HAND LAST REPORT \$ 2376.33  b. TOTAL RECEIPTS THIS PERIOD \$ 35.67  c. TOTAL DISBURSEMENTS THIS PERIOD \$ 896.90  d. BALANCE ON HAND (12:a. plus 12.b. minus 12.c.) \$ /5/5.04  e. TOTAL LOANS QUITSTANDING \$ -0 -	Jennefer L. Berg signature of witness	7/8/09	signal	ture of witness	7/8/03 date
b. TOTAL RECEIPTS THIS PERIOD \$ 35.67  c. TOTAL DISBURSEMENTS THIS PERIOD \$ 896.90  d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) \$ 1515.04  e. TOTAL LOANS QUITSTANDING \$ -0 -	12. SUMMARY		25		
b. TOTAL RECEIPTS THIS PERIOD \$ 35.67  c. TOTAL DISBURSEMENTS THIS PERIOD \$ 896.90  d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) \$ 1515.04  e. TOTAL LOANS QUITSTANDING \$ -0 -	a. BALANCE ON HAND LAST REPORT			\$ 2376.3	3
d. BALANCE ON HAND (12:a. plus 12.b. minus 12.c.) \$ /5/5.04  e. TOTAL LOANS QUTSTANDING \$ -0 -	b. TOTAL RECEIPTS THIS PERIOD			\$ 35.61	<i>'</i>
e. TOTAL LOANS QUITSTANDING	c. TOTAL DISBURSEMENTS THIS PERIOD .			\$ 896,90	
	d. BALANCE ON HAND (12.a. plus 12.b. m	ninus 12.c.)		\$	1515.04
	e. TOTAL LOANS OUTSTANDING			\$	0-

#### SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD
Carol Berz	FROM: 4-1-09 TO: 6-30-09
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>35.°°</u>
b. Itemized Contributions (over \$100 from each source this period)	\$
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$\$
16. LOANS RECEIVED THIS REPORTING PERIOD	\$0-
17. INTEREST RECEIVED THIS REPORTING PERIOD	Management of the Control of the Con
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	35.6/
DISBURSEMENTS	
19. EXPENDITURES (other than loan payments)	
a. Expenditures (\$100 or less each payee this period) (must be listed by category -	e.g., printing, postage, gasoline)
Volunteer Gifts \$ 22.	34_
\$	
<u> </u>	
· \$	
<u></u> \$	
\$	
\$	
<u> </u>	
\$	
Total of Expenditures (\$100 or less each payee)	22.34
b. Itemized Expenditures (Over \$100 each payee this period)	324
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ 896.90
20. LOAN REPAYMENTS MADE THIS PERIOD	
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	
22.IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$
b. Itemized in-kind contributions (over \$100 from each source this period)	\$
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.	b.)s -0÷
23. OBLIGATIONS	
a. Unitemized Obligations Outstanding (\$100 or less each)	\$0-
b. Itemized Obligations Outstanding (Over \$100 each)	And the state of t
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i ite	0.765-701
The showing the	12.1.)

### **ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVER	RING THE PERIOD		
Carol Berz	FROM: 4-1-09	TO: 6-30-09				
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	ane)	Amount - O -				
4. COMPLETE THE APPROPRIATE ITEMS FOR EA						
First Name	e	Contribution Received For:	Too morn any contributor	Amount of Contribution		
Last Name/Organization Name	L			10		
Last NamerOrganization Name		Primary Election	General Election			
Address		**************************************	Runoff (Local Election	s Only)	T.	
City	State Zip Code		Date of Contribution		Aggregate This Election	
Occupation						
Employer			-			
First Name	Middle Nam		Contribution Received For:	The State of the S		
Past Name	MIXIGIE NAIT	16	Contribution Received For:		Amount of Contribution	
Last Name/Organization Name			Primary Election	General Election		
Address			Runoff (Local Election	s Only)		
City	State	Zip Code	Date of Contribution	Date of Contribution		
Occupation			7			
Employer			-		a	
First Name	Middle Name	0	Contribution Received For:		Amount of Contribution	
Last Name/Organization Name			Primary Election	General Election		
Address			Runoff (Local Election	e Oaks)		
e:				s Only)		
CIN	State	Zip Code	Date of Contribution		Aggregate This Election	
Occupation			1			
Employer			-			
First Name	Middle Nam	е	Contribution Received For:		Amount of Contribution	
·Last Name/Organization Name			Primary Election	General Election	17	
Address		Runoff (Local Election	s Only)			
City	State Zip Code		Date of Contribution	Date of Contribution		
Occupation						
Employer	***************************************	1				
TOTAL ITEMIZED CONTRIBUTIONS     (Carry forward to item 3. of next page if additional pages)	of this farm or	Buread )			-0-	

### ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

Carry   State   Zip Code   Description of lin-Kind Contribution Received For:   Printing Fleetion   Aggregate his Bection	1. NAME OF CANDIDATE OR		396	15		2. REPORT COVER	RING THE PERIOD			
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter 5) of first itemized page)	Carol De	rz				FROM: 4-1-09				
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions trading more than \$100 term any contributor period).  First Name  Middle Name  Middle Name  Middle Name  In-Kind Contribution Received For:    Primary Election   General Election     Primary	3. TOTAL ITEMIZED IN-KIND O	CONTRIBUTIONS	FROM	PRECEDING PAGE	(enter \$0 if first itemized page	a)	Amount -0 -			
In-Kind Contribution Received For:							tributor during the period)			
Primary Election   General Election   Aggregate this Election   Runnoff (Local Elections Only)	Sant Sound					The state of the s	The second second second			
Runnoff (Local Elections Only)	Last Nama//maniration Nama				Table of all faile contribution					
Coly   Sate   Zip Code   Description of In-Kind Contribution Received For:   Primary Election   General Election   Primary Election   General El	Last Harrier Organization Harrie				Runoff (Local Election	ns Only)				
Coopysistion   Employer	Address				Date of In-Kind Contribution		Aggregate this Election			
First Name	City	City State Zip Code		Description of In-Kind Contribution						
Primary Election   General Election   Aggregate this Election   City   State   Zip Code	Occupation	Occupation Employer			-					
Primary Election   General Election   Agregate this Election   City   State   Zip Code										
Runoff (Local Elections Only)	First Name	М	iddle Nar	me	In-Kind Contribution Receive	Value of In-Kind Contribution				
Runoff (Local Elections Only)   Address	Last Name/Organization Name				Primary Election					
City			A		Runoff (Local Election	ns Only)				
Cocupation   Employer	Address				Date of In-Kind Contribution		Amount  C Amount  C Amount  C D D D D D D D D D D D D D D D D D D			
First Name	City	St	ate	Zip Code	Description of In-Kind Contribution					
Primary Election   General Election	Occupation	Employer			-		30			
Primary Election   General Election										
Runoff (Local Elections Only)	First Name	MI	iddle Nar	ne		d For:	Value of in-Kind Contribution			
Address Date of In-Kind Contribution Aggregate this Election  City State Zip Code Description of In-Kind Contribution  First Name Middle Name In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)  Address Date of In-Kind Contribution  City State Zip Code Description of In-Kind Contribution  Cocupation Employer  In-Kind Contribution  Aggregate this Election  City State Zip Code Description of In-Kind Contribution  In-Kind Contribution  Cocupation Employer  In-Kind Contribution Received For: Primary Election General Election Primary Election General Election Runoff (Local Elections Only)  Address  Determine In-Kind Contribution Received For: Primary Election General Election Description of In-Kind Contribution Description of In-Kind Contribution Description of In-Kind Contribution  City State Zip Code Description of In-Kind Contribution  Description of In-Kind Contribution  City State Zip Code Description of In-Kind Contribution  City State Zip Code Description of In-Kind Contribution  City State Zip Code Description of In-Kind Contribution  City Cocupation Employer  5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS (Carry floward to item 3. of next page if additional pages of this form are used 1)	Last Name/Organization Name	Name/Organization Name		Primary Election						
City State Zip Code Description of In-Kind Contribution    Print Name						ns Only)				
Cocupation   Employer	Address				Date of In-Kind Contribution		Aggregate this Election			
First Name    Middle Name   In-Kind Contribution Received For:   Primary Election   General Election   Primary Election   General Election   Runoff (Local Elections Only)	City	St	ate	Zip Code	Description of In-Kind Contribution					
Last Name/Organization Name    Primary Election   General Election     Runoff (Local Elections Only)	Occupation	Employer			1					
Last Name/Organization Name    Primary Election   General Election     Runoff (Local Elections Only)							*			
Runoff (Local Elections Only)   Address   Date of In-Kind Contribution   Aggregate this Election	First Name	. М	iddle Nar	ne			Value of In-Kind Contribution			
Address  Date of In-Kind Contribution  Aggregate this Election  City  Description of In-Kind Contribution  Description of In-Kind Contribution  In-Kind Contribution  In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)  Address  Date of In-Kind Contribution  Description of In-Kind Contribution  Aggregate this Election  Description of In-Kind Contribution  Aggregate this Election  Description of In-Kind Contribution  Occupation  Employer  5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS (Carry forward to item 3, of next page if additional pages of this form are used.)	Last Name/Organization Name				Primary Election					
City State Zip Code Description of In-Kind Contribution    Cocupation   Employer	*					* .				
Cocupation Employer  First Name Middle Name In-Kind Contribution Received For: Value of In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)  Address Date of In-Kind Contribution Aggregate this Election City State Zip Code Description of In-Kind Contribution  Total ITEMIZED IN-KIND CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.)	Address				Date of In-Kind Contribution		Aggregate this Election			
First Name    Middle Name   In-Kind Contribution Received For:   Value of In-Kind Contribution Received For:   Primary Election   General Election   Runoff (Local Elections Only)	City	Sta	ate	Zip Code	Description of In-Kind Contribution					
Last Name/Organization Name  Primary Election General Election  Runoff (Local Elections Only)  Date of in-Kind Contribution  Aggregate this Election  City State Zip Code  Description of In-Kind Contribution  Cocupation  Employer  5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS  (Carry forward to item 3. of next page if additional pages of this form are used.)	Occupation	Employer			1					
Last Name/Organization Name  Primary Election General Election  Runoff (Local Elections Only)  Date of in-Kind Contribution  Aggregate this Election  City State Zip Code  Description of in-Kind Contribution  Cocupation  Employer  5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS  (Carry forward to item 3, of next page if additional pages of this form are used.)	14						50			
Last Name/Organization Name    Primary Election   General Election     Runoff (Local Elections Only)	First Name	Mid	ddle Nam	е			Value of In-Kind Contribution			
Address  Date of In-Kind Contribution  Aggregate this Election  City  State  Zip Code  Description of In-Kind Contribution  Description of In-Kind Contribution  5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS  (Carry forward to item 3. of next page if additional pages of this form are used.)	ast Name/Organization Name		V							
City State Zip Code Description of In-Kind Contribution  5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.)	Addraes					s Only)				
Docupation				410-1110 Jan 19-1110 19-11	Date of In-Kind Contribution		Aggregate this Election			
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS  (Carry forward to item 3. of next page if additional pages of this form are used.)	City	State Zip Code		Description of In-Kind Contribution						
(Carry forward to item 3. of next page if additional pages of this form are used.)	Occupation	Employer			<del>-</del>					
(Carry forward to item 3. of next page if additional pages of this form are used.)	2 Wiles 200 (20 William 20 Willia		W. N=	The state of the s			1.00			
(vali y inimatic to itent 3, or next page it additional pages of this form are used.)										
(If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)	(If this is the last page of in-kind contr	in additional pages of this foutions, this amount mu	s form ar ist be sho	re used.) own in item 22b. of summar	y.)		-0-			
SS-1128 (Rev. 2/06) Page 4 of 7 RDA 1	SS-1128 (Rev. 2/06)				Page	4 0 7	RDA 1159			

## ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVER	RING THE PERIOD
Carol Berz				FROM: 4-1-09	TO: 6-30-09
3. TOTAL ITEMIZED CAMPAIGN EXPENDITE				Amount 874, 56	
4. COMPLETE THE APPROPRIATE ITEMS FOR E	ACH ITEM	ZED EXPENDITURE (	expenditures totaling more than \$100	to any payee during the per	iod)
First Name	Middle Nar	me	Purpose of Expenditure		Amount of Expenditure
Chattanoga News ( Address P.O. Box 4505	Chron	icle	Advertis	ing Space	400.00
Chattanooga	State	Zip Code 37405	N. 22 T. N.	) '	700
First Name	Middle Nar	AND THE RESERVE THE PERSON NAMED IN	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Verizon Wireless Address P.O. Box 105378 City	Zip Code	cellular p service for staff è volu	hone Campaign	474.56	
Atlanta	State	30348	staff & volu	inteers	10-27 April 10-27 Second Sec
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name			1		
Address					
City	State	Zip Code	Ī		
		8			
First Name .	Middle Nam	θ	Purpose of Expenditure		Amount of Expenditure
First Name  Last Name/Business Name	Middle Nam	0	Purpose of Expenditure		Amount of Expenditure
	Middle Nam	Ð	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name	Middle Nam	e Zip Code	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Address		Zip Code	Purpose of Expenditure  Purpose of Expenditure		Amount of Expenditure  Amount of Expenditure
Last Name/Business Name  Address  City	State	Zip Code			des.
Last Name/Business Name  Address  City  First Name	State	Zip Code			des.
Last Name/Business Name  Address  City  First Name  Last Name/Business Name  Address	State	Zip Code			des.
Last Name/Business Name  Address  City  First Name  Last Name/Business Name  Address	State Middle Nam	Zip Code e			des.
Last Name/Business Name  Address  City  First Name  Last Name/Business Name  Address  City	State Middle Nam	Zip Code e	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name  Address  City  First Name  Last Name/Business Name  Address  City  First Name	State Middle Nam	Zip Code e	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name  Address  City  First Name  Last Name/Business Name  Address  City  First Name  Last Name/Business Name	State Middle Nam	Zip Code e	Purpose of Expenditure		Amount of Expenditure

#### **ITEMIZED STATEMENT OF LOANS - CANDIDATE**

1. NAME OF CANDIDATE	OR COMMITTEE				***************************************		2.	REPORT C	OVER	ING THE PERIOD
Carol Berz						FROM: TO:				
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (								4-1-0	9	6-30-09
3. COMPLETE THE APPR	OPRIATETIEMS	FOR EACH	II EMIZ	ZED LOAN (	loans totaling mo	ore than \$100	from any source	during the per	riod)	
Complete the Following for the	Source of the Loan	1								
First Name ·	Middle Na	Service Control of the Control of th		Outstanding I		Loans		oan l	Outs	tanding Loan Balance
				(Beginning	of Period)	Received	Pay	ments		(End of Period)
Last Name/Organization Name				1	1					
Address				Loan Receive		_		Date of Loa	n	1
City	State	Zip Code P		☐ Primary	Election	☐ General	Election			
				☐ Runoff	(Local Elections C	nly)				
	List All End	orsers or Gua	rantors f	or Above Loa	n (If more space	e is needed	please attach	a page)		
First Name	X	Middle Nan			First Name				Middle	Name
Last Name/Organization Name		3*			Last Name/Orga	anization Nam	ne			
Address	<u>E)</u>				Address				-	i
City		State	Zip C	ode	City				State	Zip Code
Amount Guaranteed Outstanding					Amount Guarant	teed Outstand	ling			
First Name		Middle Nam	ne		First Name			No. of Concession, Name of Street, or other	Middle	Name
					First Name Middle Name					
Last Name/Organization Name					Last Name/Orga	nization Nam			_	
					Last HarnerOrge	anzauon ream				
Address					Address					
Olt		Clafe	7:- 0		0"					
City		State	Zip Ca	ode	City State Zip Code					Zip Code
Amount Guaranteed Outstanding					Amount Guarant	teed Outstand	ling			
M Co										
First Name		Middle Nam	ne .		First Name				Middle	e Name
Last Name/Organization Name					1 10	-1				2000
Lest Name/Organization Name	19				Last Name/Orga	inization Nam	e			
Address	-				Address					
8		ů.								
City		State	Zip Co	ode	City				State	Zip Code
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding					
					A HOUR GUSIAN	eeu Ouistand	uig			#/ #/
First Name		Middle Nam	i A		First Name		-		10.0	West of the second
	Middle Name				First Name Middle Name					Name
Last Name/Organization Name					Last Name/Orga	nization Nam	e			
Address					Address					for
Address .					Address					
City		State	Zip Co	ode	City				State	Zip Code
Amount Gueranteed Outstand's									Ciale	Zip Code
Amount Guaranteed Outstanding					Amount Guarant	eed Outstand	ing			-
Totals for all   cane /comp	lete on leet need a	f Hamisad Is	ane\		244	-	AWAY TO SEE	-		
4. Totals for all Loans (complete on last page of itemized loans)  (Total loans received should also be shown in item 16. on summary page.)  (Total loan payments should also be shown in item 20. on summary page.)  (Total outstanding loan balance should also be shown in item 12.e. on front page.)				Outstanding Loa (Beginning of		Loans Received	Loan		Outstanding Loan Balance	
							Payme	- 1	(End of Period)	
(Total outstanding loan balance sho	ould also be shown in ite	em 12.e. on front	(page.)		-0		-0-	-0	-	-0-

### **ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD									
Carol Berz						FROM: 4-1-09 TO: 6-30-09				
OBLIGATION (obligations totaling more tha	COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)			Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)				
First Name	Middle Na	ame								
Last Name/Business Name			_							
Address			_							
City	State	Zip Code								
Description of Obligation										
First Name	Middle Na	ame								
Last Name/Business Name	L		_							
Address										
City	State	Zip Code								
Description of Obligation	1									
First Name	Middle Name		~							
Last Name/Business Name										
Address										
City	State	Zip Code								
Description of Obligation										
First Name	Middle Na	ame	T							
Last Name/Business Name	L									
Address			-		*					
City	State	Zip Code	-							
Description of Obligation	1				L					
	,					-				
First Name	Middle Name				2					
Last Name/Business Name										
Address										
City	State	Zip Code								
Description of Obligation		-	-							
4. TOTALS			_			T				
(Total from Outstanding Balance - (End of Period) in item 23b. on summary page.)	column mu	st also be shown	-0-	-0-	-0-	-0-				